



Urban District of Chadderton

ANNUAL REPORT

of the

Medical Officer of Health

for the year

1946

J. S. G. BURNETT, M.D., D.P.H.

Medical Officer of Health.

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To the Chairman and Members of the Urban District Council.

The period of idealistic planning is past and now the task is that of adapting these plans for a better world in the future to fit the hard realities of the present. In no field is the adaptation more fraught with difficulties than that of the public health. Improvements in the physical environment are held up not only by inability to build new houses in sufficient quantities but by increasing difficulty in achieving repairs to old ones. The social background of the people is suffering from a failure in supply of those properly qualified field officers competent to advise and assist the family in its daily problems and the basic problem of nutrition concerning which so much has been achieved in recent years is again becoming one for anxiety because with a smaller than war-time ration there is in this area at least a greater employment of married women in industry and a consequent lowering of household efficiency. Finally the whole structure of public health administration is in the process of being reshaped and the dislocation, albeit temporary, thereby produced is not conducive to the best results.

In Chadderton during 1946 we seem at least to have maintained our position. The crude death rate is higher not because 1946 was a bad year but because 1945 was a very favourable year. The commoner infectious diseases continue to be responsible only for an occasional death; we can still point with pride to an infant mortality rate that is the envy of our neighbours even though we are conscious of the insubstantial foundations on which we are at present poised and maternal mortality when it occurs seems no longer to be the result of an obstetrical problem but rather of a social one with attempted abortion as the intervening factor. Whilst there is cause for satisfaction, therefore, if prevention of death is the yard-stick with which we measure, there is a less optimistic picture if we think in terms of family well-being. The policy pursued in recent years has been one designed to bring relief and advice to the family in the wide variety of problems ranging from simple disturbances of the physical environment to acute emotional imbalance within the family. This seems to me to be the true function of the health service of the future. The times are not propitious for there is plenty today to upset family wellbeing, and even where the cause is apparent it is frequently impossible to apply the cure because of the play of factors outside the control of the council or its

officers. Nevertheless some progress has been made. The attack on housing defects begun towards the end of 1945 gathered momentum in 1946 and many of the grosser defects, the accumulation of the war years, have been dealt with. Plans for a day nursery service co-ordinated with industry, which at one time looked promising, subsequently did not materialise, but if the scheme did nothing more it brought home to the industrialists of the area the desire of the council and its officers to assist, in so far as it lay in their power, industry in its welfare problems and to-day there is a sincere and increasing use of the department's services made by factory managements in the knowledge that the services offered are those of practical technical nature rather than of censure and grudging criticism. There has been active co-operation from the general public particularly in relation to the control of infectious diseases though as yet there is an insufficient awareness of the need for scrupulous cleanliness in the handling of foodstuffs, especially in association with the preparation and serving of bulk meals. This necessitates satisfactory toilet provision and education in its use and action is necessary under both heads.

It will be apparent from a perusal of the succeeding pages that the service has not been inactive during the period under review and that this chronicle is but a reflex of the activities of a staff which has unhesitatingly given of its best at all times and under all conditions. It is with the greatest pleasure that I record my thanks to them for their loyalty and their attention to duty and to my colleagues in other departments for the advice and help they have so frequently rendered in many problems which would otherwise have remained unsolved.

In concluding this tenth and last report that I shall have the privilege of submitting for your consideration I have to express my gratitude for the active interest you have shown in the work of the department and for the whole-hearted support and sympathetic understanding shown me by the Chairman of your Health Committee that have sustained me in difficult periods and fortified me in happier times.

I am, Ladies and Gentlemen,

Your obedient Servant,

J. S. G. BURNETT.

October, 1947.
Public Health Department,
Town Hall,
Chadderton.

CHADDERTON URBAN DISTRICT.

Health Committee.

Chairman :

Councillor Arthur Tongue, J.P.

Vice-Chairman :

Councillor James Taylor (Central).

Councillor Edwin Buckley, J.P.

Councillor Harry Greenwood.

Councillor Roland Hill.

Councillor Harold Halford Newton.

Councillor George Lister Renshaw.

Councillor John Jardine Seal.

Councillor James Taylor (North).

Councillor William Turner.

Maternity and Child Welfare Committee.

Chairman :

Councillor Arthur Tongue, J.P.

Vice-Chairman :

Councillor James Taylor (Central).

Councillor Edwin Buckley, J.P.

Councillor Harry Greenwood.

Councillor Roland Hill.

Councillor Harold Halford Newton.

Councillor George Lister Renshaw.

Councillor John Jardine Seal.

Councillor James Taylor (North).

Councillor William Turner.

Mrs. C. E. Buckley.

Mrs. E. Friend.

Mrs. C. Halkyard.

Mrs. L. Tongue.

STAFF.

Medical Officer of Health ...	J. S. G. Burnett, M.D., D.P.H.
Assistant Medical Officer of Health	V. Settle, M.B., CH.B., B.SC., D.C.H. (Resigned 17.8.46).
Consultant Obstetric Surgeon	R. Newton, M.D., M.R.C.O.G.
Visiting Ophthalmologist ...	R. S. Scott, M.B., CH.B., D.O.M.S.
Visiting Orthopædic Surgeon	M. Johnstone, M.B., CH.B.
Dental Officer	F. I. Wilson, L.D.S.
Senior Sanitary Inspector ...	J. Harris, M.R.S.I., A.M.S.I.E.
Additional Sanitary Inspector	H. W. Potter, A.R.S.I.
Health Visitors	E. E. Tudge, S.R.N., S.C.M. P. John, S.R.N., H.V.CERT. A. Whitehead, S.R.N., H.V.CERT.
Orthopædic Nurse	J. Tyers, S.R.N., O.N.C.
Day Nursery Matrons	R. D. Crossley, S.R.N. M. Boston, S.R.N., S.R.C.N.
Assistant Sanitary Inspector	H. Prenton.
Dental Attendant	Miss B. M. Cunningham.
Chief Clerk	N. Bamforth.
Clerks	Miss S. Barker. Miss M. Broadbent. Miss J. Ward.

VITAL STATISTICS.

The main vital statistics for the year, after correction for inward and outward transfers, as furnished by the Registrar-General, are given in Table 1.

TABLE 1.

Live Births :—		Total	M.	F.	
Legitimate	556	284	272	Birth-rate per 1,000	
Illegitimate	19	12	7	estimated population	
				mid-1946	18.7
Total	575	296	279		
Stillbirths	22	13	9	Rate per 1,000 total	
				(live and still)	
				births	36
Deaths	375	186	189	Death-rate per 1,000	
				estimated population	
				... ..	12.2
Deaths from Puerperal causes :—				Death-rate per 1,000	
			Deaths	total (live and still)	
				births	
Puerperal and post-abortive sepsis			Nil	Nil	
Other maternal causes			Nil	Nil	
Total			Nil	Nil	
Death-rate of infants under one year of age :—					
All infants per 1,000 live births					31
Legitimate infants per 1,000 legitimate live births...					30
Illegitimate infants per 1,000 illegitimate live births					52
Deaths from Cancer (all ages)					59
Deaths from Measles (all ages)					Nil
Deaths from Whooping Cough (all ages)					1
Deaths from Diarrhoea (under 2 years of age)					1

POPULATION.

The Registrar-General's estimate of population for the year 1946 is 30,700, the highest ever recorded for the area and 1,340 above the 1945 figure. The curve of natural population increase continues upward, the figure of 200 being the greatest annual increase since 1921. In the nine years 1938-1946 the number of registered births has exceeded the number of registered deaths by 1,254.

TABLE 2.
NATURAL INCREASE OF POPULATION.

1946	+ 200	1933	— 68
1945	+ 136	1932	— 29
1944	+ 189	1931	— 23
1943	+ 184	1930	— 17
1942	+ 147	1929	— 105
1941	+ 87	1928	+ 6
1940	+ 43	1927	+ 48
1939	+ 117	1926	— 6
1938	+ 151	1925	+ 66
1937	+ 82	1924	+ 134
1936	— 28	1923	+ 95
1935	— 61	1922	+ 158
1934	+ 10	1921	+ 220

BIRTHS.

The number of live births assigned to the town by the Registrar-General was 575, representing an annual birth rate of 18.7 per thousand of the population, as compared with a figure of 19.1 for England and Wales and 21.3 for the 148 Smaller Towns.

As will be seen from Table 3 the birth rate continues at a level about 50 per cent. higher than that prevailing in the first half of the previous decade and there is no evidence yet to suggest an interruption of this higher level.

MARRIAGES.

The number of marriages occurring in the district plus those taking place at the District Registry Office, Oldham, where both participants are or the woman only is resident in Chadderton numbered 270. The corresponding figure for the previous year was 254.

TABLE 3.

Year	Birth Rate	Crude Death Rate	Zymotic Death Rate	Infant Mortality Rate	Cancer Death Rate
1912	24.2	17.0	1.43	130	1.0
1913	25.0	13.7	1.57	116	0.6
1914	24.1	15.2	1.86	101	1.0
1915	22.1	15.4	1.43	124	0.9
1916	18.6	14.3	1.19	88	0.9
1917	16.6	15.0	1.14	86	1.1
1918	15.7	20.6	0.99	117	1.0
1919	13.3	13.9	0.35	126	1.2
1920	23.2	11.8	0.74	98	1.2
1921	20.2	12.7	0.57	104	1.3
1922	18.9	13.5	0.64	66	1.1
1923	17.0	13.7	0.47	110	1.2
1924	15.1	10.5	0.27	79	1.4
1925	15.3	14.0	0.59	110	1.0
1926	13.4	14.0	0.32	134	1.3
1927	15.7	13.9	0.29	92	1.2
1928	12.9	12.7	0.21	74	1.6
1929	12.0	15.7	0.66	116	1.4
1930	11.7	12.3	0.25	80	1.6
1931	12.3	13.2	0.18	78	1.4
1932	12.5	13.3	0.50	60	2.0
1933	10.8	13.3	0.25	66	1.3
1934	13.0	12.6	0.36	61	1.4
1935	11.4	13.6	0.28	63	1.9
1936	12.3	13.3	0.45	77	1.8
1937	14.9	12.1	0.30	68	1.5
1938	16.3	11.3	0.19	42	1.9
1939	15.6	11.8	0.19	50	1.7
1940	15.8	14.4	0.13	59	2.4
1941	15.6	12.7	0.10	42	1.8
1942	17.7	12.7	0.13	51	1.7
1943	18.6	12.3	0.10	46	1.8
1944	18.7	12.3	0.10	47	2.0
1945	16.1	11.5	0.07	27	1.2
1946	18.7	12.2	0.10	31	1.9

DEATHS.

The number of deaths recorded for Chadderton during 1946 was 375, giving a crude rate of 12.2 per thousand of the population. Age and ward incidence of deaths occurring in 1946 and the seasonal incidence of deaths since 1938 are shown in Tables 4 and 5 respectively.

TABLE 4.
Age and Ward Incidence of Deaths Occurring in 1946.

Ward	Under	1-	2-	5-	15-	25-	45-	65-	75 and upwards	Total
North ...	4	1	—	1	1	11	37	37	35	127
Central ...	7	—	1	1	3	7	38	33	27	117
South ...	7	—	3	1	2	11	45	39	23	131
Total...	18	1	4	3	6	29	120	109	85	375

TABLE 5.
Seasonal Incidence of Deaths Occurring since 1938.

Deaths occurring during :—	1938	1939	1940	1941	1942	1943	1944	1945	1946
1st Quarter	94	113	165	131	136	98	121	117	115
2nd Quarter	75	80	89	83	87	67	79	71	85
3rd Quarter	84	71	103	85	67	65	66	61	74
4th Quarter	90	99	84	87	86	129	97	90	101
Total ...	343	363	441	386	376	359	363	339	375

Infant mortality at 31 per 1,000 live births remains at a satisfactory low level for a second year and the zymotic death rate at 0.098 per 1,000 of the population is a reflex of the improved hygienic conditions and the advances in medical treatment existing in modern times. As was forecast last year the lowered cancer death rate was not maintained and this year's rate of 1.9 deaths per 1,000 of the population represents an average figure to be expected in prevailing circumstances. Comparative cancer death rates since 1925 are shown in Table 6.

TABLE 6.
COMPARATIVE CANCER DEATH RATE PER 1,000
POPULATION SINCE 1925.

Year	Crompton	Royton	Middleton	Chadderton	Oldham	Manchester	England & Wales
1925	2.0	1.4	1.4	1.0	1.4	1.4	1.3
1926	1.4	1.5	1.3	1.3	1.6	1.5	1.4
1927	1.5	0.9	1.5	1.2	1.5	1.5	1.4
1928	1.5	1.8	1.2	1.6	1.5	1.5	1.4
1929	1.6	1.3	1.3	1.4	1.6	1.6	1.4
1930	1.6	1.7	1.6	1.6	1.6	1.5	1.5
1931	1.7	0.6	1.7	1.4	1.5	1.6	1.5
1932	1.3	1.4	1.5	2.0	1.7	1.7	1.5
1933	1.0	1.4	1.9	1.3	1.5	1.6	1.5
1934	1.5	1.7	1.8	1.4	1.6	1.7	1.6
1935	2.0	1.5	1.5	1.9	1.8	1.8	1.6
1936	1.4	1.6	1.9	1.8	1.9	1.7	1.6
1937	1.8	1.4	1.3	1.5	1.8	1.7	1.6
1938	1.3	1.9	2.0	1.9	1.9	1.8	1.7
1939	1.8	1.6	1.8	1.7	1.9	1.8	1.6
1940	2.0	1.5	1.3	2.4	1.8	2.0	1.7
1941	1.5	1.9	2.1	1.8	1.9	2.1	1.7
1942	2.4	2.7	2.0	1.7	2.0	2.1	1.7
1943	2.5	2.3	1.9	1.8	2.0	2.1	1.7
1944	1.8	2.1	2.1	2.0	1.8	2.1	1.7
1945	2.3	2.2	2.1	1.2	2.1	2.1	1.7
1946	1.6	1.8	2.1	1.9	2.1	1.9	1.8

The gradual decrease in the annual number of deaths from tuberculosis which was occurring in the 1930's and which was interrupted during the war years has been resumed and fewer deaths than ever occurred in Chadderton from this cause in 1946.

1946 was a less favourable year than its predecessor and the general death rate was 0.7 per 1,000 of the population higher. The increase is directly related to the increased number of deaths ascribed to cancer but in fact this does not mean an increase in the incidence of cancer, the explanation being that favourable factors prevailing in 1945 caused a prolongation of life of several months with death occurring in 1946.

TABLE 7.

**Causes of Death Expressed as a Ratio of
Total Chadderton Deaths.**

Cause of Death.	Proportion per 1,000 deaths from all causes.								
	1946	1945	1944	1943	1942	1941	1940	1938	1935
Diseases of the heart and circulatory system	429	410	366	312	353	401	242	324	307
Bronchitis, pneumonia and other respiratory diseases (excluding influenza)	118	198	151	161	165	142	186	108	119
Cancer, malignant disease	157	100	165	150	138	145	165	163	138
Tuberculosis (all forms)	21	44	55	56	45	28	23	55	26

TABLE 8.

Corresponding Figures—England and Wales.

Cause of Death.	Proportion per 1,000 deaths from all causes.				
	1945	1944	1940-41	1938	1935
Diseases of the heart and circulatory system	331	317	292	327	295
Bronchitis, pneumonia and other respiratory diseases (excluding influenza) ...	114	108	135	91	99
Cancer, malignant disease... ..	152	147	124	143	135
Tuberculosis (all forms)	49	49	51	55	62

As will be seen from Table 7 some increase in death ascribed to diseases of the heart and circulation also occurred and here again the likely explanation is that the favourable conditions of 1945 gave a slightly longer lease of life to some who might otherwise have succumbed in 1945.

TABLE 9.
Causes of Death in Chadderton during the year 1946.

Causes of death				Males	Females
1.	Typhoid and paratyphoid fevers	...	—	—	—
2.	Cerebro-spinal fever	... ..	—	—	1
3.	Scarlet Fever	... ..	—	—	—
4.	Whooping Cough	... ..	—	—	1
5.	Diphtheria	... ..	1	—	—
6.	Tuberculosis of respiratory system...	...	4	—	1
7.	Other forms of tuberculosis	... ..	3	—	—
8.	Syphilitic diseases	... ..	1	—	1
9.	Influenza	... ..	6	—	4
10.	Measles	... ..	—	—	—
11.	Acute poliomyelitis and polioencephalitis	... ..	—	—	—
12.	Acute infectious encephalitis...	...	—	—	—
13.	M.—Cancer of buccal cavity and œsophagus	... ..	3	—	—
13.	F.—Cancer of uterus	... ..	—	—	2
14.	Cancer of stomach and duodenum	... ..	8	—	7
15.	Cancer of breast	... ..	2	—	5
16.	Cancer of all other sites	... ..	18	—	14
17.	Diabetes	... ..	2	—	3
18.	Intra-cranial vascular lesions	... ..	17	—	36
19.	Heart disease	... ..	51	—	50
20.	Other diseases of circulatory system	... ..	5	—	2
21.	Bronchitis	... ..	16	—	10
22.	Pneumonia	... ..	8	—	4
23.	Other respiratory diseases	... ..	4	—	2
24.	Ulcer of stomach or duodenum	... ..	—	—	1
25.	Diarrhœa (under 2 years)	... ..	1	—	—
26.	Appendicitis	... ..	1	—	1
27.	Other digestive diseases	... ..	3	—	7
28.	Nephritis	... ..	4	—	7
29.	Puerperal and post-abortive sepsis	... ..	—	—	—
30.	Other maternal causes	... ..	—	—	—
31.	Prémature birth	... ..	5	—	2
32.	Congenital malformation, birth injury, infantile diseases	... ..	5	—	2
33.	Suicide	... ..	1	—	6
34.	Road traffic accidents	... ..	2	—	—
35.	Other violent causes	... ..	6	—	5
36.	All other causes	... ..	9	—	15
All causes				186	189

GENERAL PROVISION OF HEALTH SERVICES.

Improvements in the services were limited by lack of opportunity in 1946 mainly to further extension of the maternity service and to general improvements in the physical aspects of environmental hygiene. The energetic action of the sanitary staff resulted in 1,040 new dustbins being supplied throughout the area and this demand has now been satisfied. Similarly certain urgent household repairs have been satisfactorily dealt with whilst the elimination of the pail closet is at present occupying time and attention. In the field of smoke abatement the council has put into practice its beliefs by installing modern fuel appliances in the new council houses in course of erection, whilst on the industrial side one of the largest coal consumers in the area has converted its plant and is now burning oil fuel.

Attention has been concentrated on industrial nursery provision and help and advice have been given to industrialists establishing nurseries, and visits have been paid to a number of canteens to advise on hygienic conditions. A good deal still requires to be done to bring especially the smaller canteens up to a satisfactory standard.

General cleanliness amongst the industrial population is engaging the attention of some industrialists and at least one firm has installed shower baths which are being used regularly by a proportion of employees.

Local authority provision for the treatment of lousiness and scabies is inadequate because of the lack of suitable clinic accommodation.

MATERNITY AND CHILD WELFARE.

NOTIFICATION OF BIRTHS.

Under Section 203 of the Public Health Act, 1936, 596 live births and 21 stillbirths were notified.

MIDWIFERY AND MATERNITY SERVICES.

During the year extension of the maternity service continued. The committee approved the establishment of a consultative post natal clinic to be held once per month and such a clinic began to operate in 1947. Local authority provision for the care of the expectant, parturient or nursing mother includes the loan of household equipment, *e.g.*, bed, cot, bed linen, personal linen, towels and baby wear, the availability of a premature cot, and, to help the midwife where there is a sagging mattress or low bed, fracture boards and bed blocks, and the supply of patterns for baby clothes, together with complete information regarding material to be used, its cost and the number of coupons required. Actual garments made according to the pattern are on display in the Central Clinic.

The usual medical, nursing and clinic arrangements have continued unchanged during the year, including the arrangements for the care of the illegitimate child made under the joint scheme with the Lancashire County Council and finally approved by the Ministry of Health in 1945.

MATERNITY SERVICES.

Table 10 shows the number of notified confinements at hospitals, nursing homes and at home in each year since 1933. 65% of the notified births in 1946 occurred in hospitals or nursing homes. It will be seen that in the 14 years under review the annual number of births related to Chadderton has almost doubled, the number of domiciliary confinements has remained more or less constant and the number of hospital deliveries has increased nearly fourfold.

TABLE 10.

Number of Chadderton Births Notified.

Year	Boundary Park Municipal Hospital	Woodfield Nursing Home	St. Mary's	Greenacres	North Manchester Maternity Home	Others	Total Hospital Births	Total Domiciliary Births	Total
1933	78	—	13	2	—	8	101	224	325
1934	98	—	16	16	1	16	147	221	368
1935	105	—	7	16	5	15	148	217	365
1936	107	—	15	21	6	14	163	210	373
1937	143	—	23	20	14	37	237	233	470
1938	146	—	16	29	12	35	238	308	546
1939	160	—	16	34	18	30	258	266	524
1940	158	—	12	31	17	30	248	246	494
1941	215	—	9	—	11	19	254	240	494
1942	276	—	12	—	9	26	323	198	521
1943	289	—	15	—	7	38	349	221	570
1944	314	37	13	—	4	10	378	221	599
1945	271	33	13	—	8	5	330	180	510
1946	355	26	11	—	6	6	404	213	617

MATERNAL MORTALITY.

No maternal death was registered for the second successive year.

In the nine years that have elapsed since the establishment of an *ad hoc* ante-natal service in Chadderton 1,219 women, practically all subsequently confined in their own homes, and representing 25% of the total confinements notified in the period, made use of the service and were subsequently confined without a single maternal fatality. Amongst the remaining 75% there occurred fourteen maternal deaths.

ANTE-NATAL CLINIC.

213 women were confined in their own homes during 1946 when 105 new cases attended the ante-natal clinic, of whom 5 were referred and subsequently delivered at St. Mary's Hospitals.

355 women were confined at Boundary Park General Hospital, Oldham, and the practice has been continued of referring immediately for ante-natal supervision at that hospital any women found to come within this group.

POST-NATAL SERVICES.

During the year the institution of an *ad hoc* post-natal clinic was considered. A decision was reached establishing a clinic to be held on the second Friday of each month and the clinic commenced to function in 1947.

STILLBIRTHS AND INFANT MORTALITY.

Stillbirths during 1946 totalled 22, representing a rate of 36 per 1,000 total births or 0.71 per 1,000 of population. The corresponding figure for England and Wales is 0.53 and for the 148 Smaller Towns 0.59. Infant deaths amounted to 18, giving an infant mortality rate of 31 per 1,000 live births as compared with rates of 43 for England and Wales and 37 for the 148 Smaller Towns.

The continued low infant mortality rate is a cause for satisfaction marred by the knowledge that inability to maintain a full complement of health visitors in the present year may prevent a continuance of the excellent results obtained in the past two years.

The combined stillbirth and neo-natal mortality rate continues high at 60 per 1,000 total births.

Of the 14 neo-natal deaths 4 were ascribed to infection and if these be excluded the combined figure, *viz.*, 32, gives a rate of 54 deaths per 1,000 total births that can reasonably be ascribed to pre-natal or natal causes.

5.2% of hospital deliveries, 5.1% of domiciliary deliveries and 3.8% of deliveries amongst mothers attending the Council's ante-natal clinic ended in stillbirth or neo-natal death.

49 premature infants were born to Chadderton mothers during the past year, 20 being born at home and 29 in hospital. 4 of the domiciliary cases and 2 hospital cases died before the end of one month.

The solution to this problem of a high mortality related to pre-natal and natal factors lies in the effective supervision of the expectant mother as soon as possible after conception. If deficient nutrition is a major factor it can be ascertained and

TABLE 11.

CHILD WELFARE CLINICS.	1940	1941	1942	1943	1944	1945	1946
Number of children who attended for the first time during the year and who, on the date of their first attendance were :—							
(i) under 1 year of age	381	356	459	435	437	395	357
(ii) between the ages of 1 and 5 years	88	59	32	47	28	33	20
Percentage of notified births represented by the number of children who on the date of their first attendance were under 1 year of age ...	80.0	75.3	87.8	79.4	75.2	81.4	60.0
Number who attended and at the end of the year were :—							
(i) under 1 year of age	278	263	336	342	337	330	356
(ii) between the ages of 1 and 5 years	536	502	492	545	558	523	466
Number of attendances by children :—							
(i) under 1 year of age	6270	6962	7243	8194	8628	7574	6871
(ii) between the ages of 1 and 5 years	4496	5769	4453	4659	4614	3695	4343
ANTE-NATAL CLINICS.							
Number of expectant mothers attended	162	159	134	130	115	105	134
Number of attendances by expectant mothers	443	575	380	382	391	286	480
Percentage of total notified live and stillbirths represented by the number of expectant mothers who attended the Ante-Natal Clinics ...	30.5	32.7	24.7	23.8	19.1	20.6	21.7
GYNÆCOLOGICAL AND POST-NATAL CLINICS.							
Number of mothers attended	10	9	4	9	10	3	1
Number of attendances	24	11	5	21	11	3	1
HEALTH VISITING.							
(i) To expectant mothers :—							
First visits	205	252	214	203	215	208	168
Total visits	366	447	292	305	397	329	215
(ii) To children under 1 year of age :—							
First visits	463	472	503	545	556	491	677
Total visits	3098	3286	3041	3161	3171	3423	3168
(iii) To children between the ages of 1 and 5 years :—							
Total visits	4457	5198	4819	5219	5441	5110	3379

measures can be taken to deal with it only through the domiciliary workers. This supervision and ascertainment has, however, proved possible here amongst a minority of mothers only. No effective co-ordination of supervision has been achieved in respect of deliveries taking place in hospital and it would not seem that the new measures for the control of maternity and midwifery services generally are likely to achieve the results desired by all without a radical alteration in the existing procedure.

Graph I shows the annual infant mortality rate for Chadderton since 1914 and Graph II demonstrates the stillbirth rate and the combined stillbirth and neo-natal mortality rate since 1928.

CHILD WELFARE SERVICES.

Four welfare sessions continue to be held weekly, two at the Central Clinic and two at Washbrook. Dental, orthopædic and ultra violet therapy continue to be provided and visual defects are treated at the refraction clinic.

The accommodation at the two Day Nurseries has been severely taxed during the year, the average attendance at Brook Street Nursery being 87.5% of capacity and at Coalshaw Green Nursery 77.5%, whilst long waiting lists exist at both nurseries.

The demand for nursery accommodation is directly related to the demand for female labour in the cotton mills and in consequence an offer was made to local employers of assistance in regard to medical control and administrative supervision, together with assistance in regard to transport arrangements, should the employers agree on the establishment of a large joint nursery to meet their individual needs. Several meetings with employers and representatives of the Ministry of Health, Ministry of Labour and the Cotton Board were held without agreement being reached and individual mills are now engaged in building nurseries of uneconomic size or making makeshift arrangements in temporary rooms and premises.

A record of home visits by health visitors and of attendances at maternity and child welfare centres since 1940 is given in Table 11.

TABLE 12.

Infant Mortality, 1946.

Cause of Death	1 day	1-7 days	1-4 w'ks	Total	1-3 m'ths	3-6 m'ths	6-12 m'ths	Total
Diarrhoea	—	—	—	—	1	—	—	1
Whooping Cough .	—	—	—	—	—	1	—	1
Pneumonia	1	2	1	4	—	—	1	5
Prematurity	4	2	1	7	—	—	—	7
Congenital Debility, Malformations, etc.	1	2	—	3	—	—	1	4
Total	6	6	2	14	1	1	2	18

PUERPERAL PYREXIA.

No case was notified during 1946.

PEMPHIGUS NEONATORUM.

No case was brought to notice during 1946.

OPHTHALMIA NEONATORUM.

No case was notified during 1946.

OTHER INFECTIOUS DISEASES.

The number of cases occurring and deaths from infectious diseases are shown in Table 13.

TABLE 13.

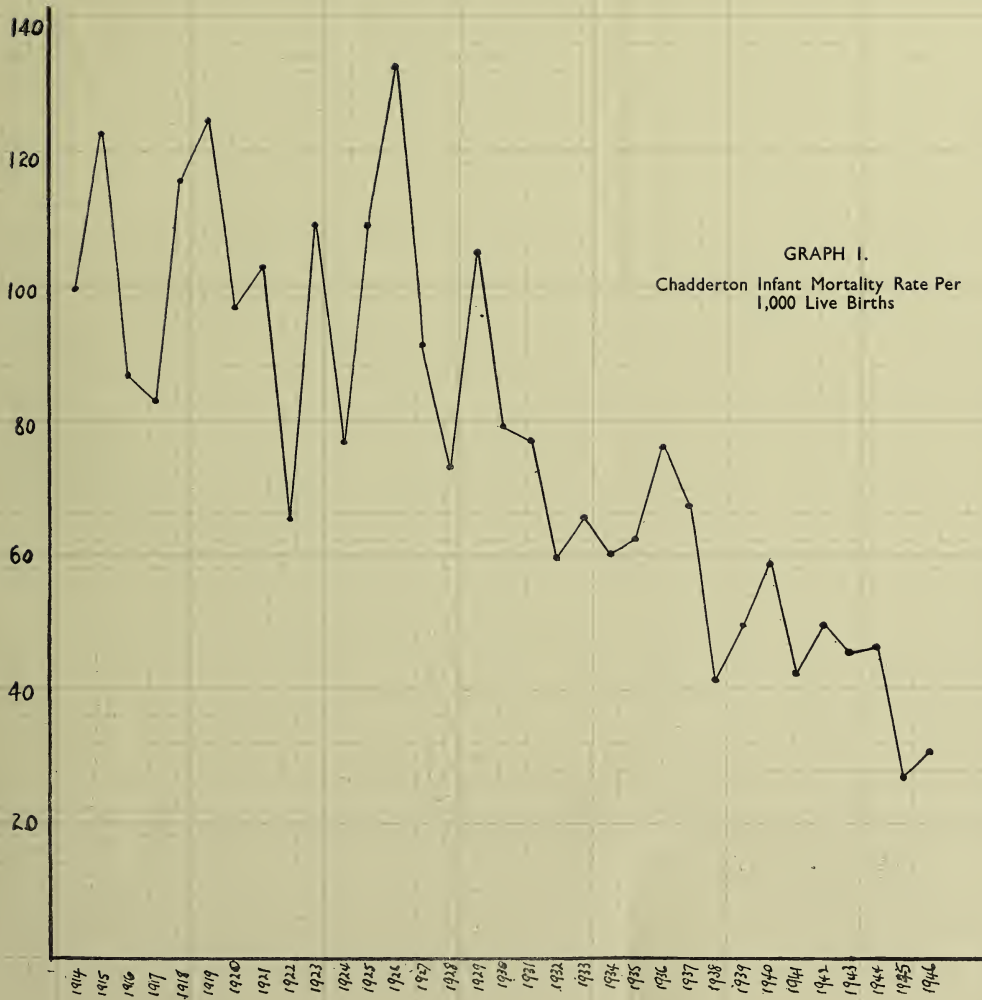
Infectious Diseases in Children under Five Years

Disease	0-1 year		1-5 years	
	Cases	Deaths	Cases	Deaths
Diphtheria	—	—	2	—
Scarlet Fever	—	—	11	—
Pneumonia	—	5	2	—
Non-Pulmonary Tuberculosis .	—	—	2	—
Whooping Cough	9	1	84	—
Measles	5	—	153	—

PROVISION OF MEALS AND MILK.

7,438 pounds of dried milk were disposed of, 446 packets being supplied without charge to the recipient.

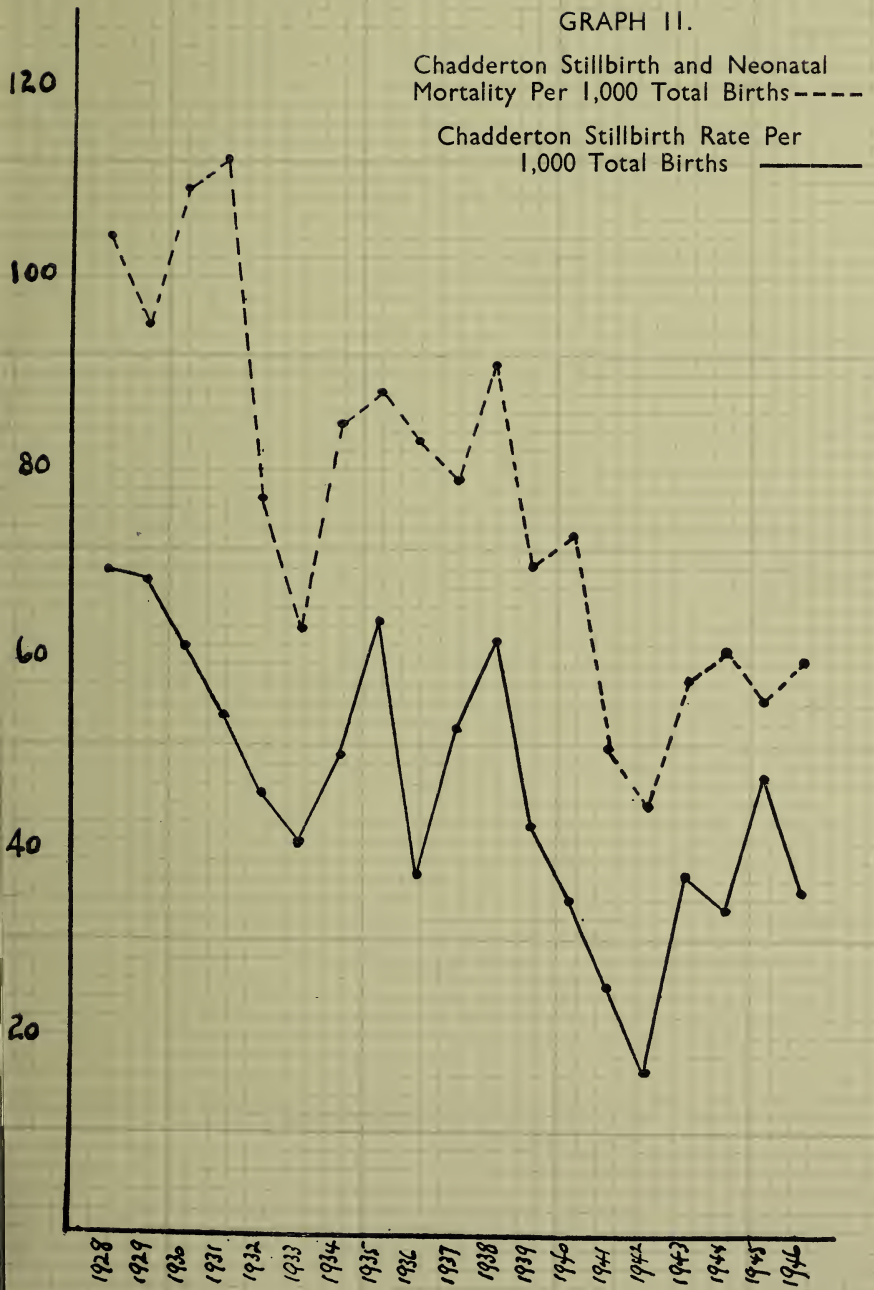
Vitamin and iron products are available also at the Welfare Centres.



GRAPH II.

Chadderton Stillbirth and Neonatal
Mortality Per 1,000 Total Births-----

Chadderton Stillbirth Rate Per
1,000 Total Births —————



CHILD LIFE PROTECTION.

Two persons were registered as receiving children for reward at the end of 1946. No legal proceedings were taken.

TABLE 14.

Number of persons on the Register who were receiving children for reward at the end of the year	...	...	...	...	...	2
Number of children on the Register :—						
(i) at the end of the year	...	...	...	...	...	2
(ii) who died during the year	...	...	...	...	...	—
(iii) on whom inquests were held during the year...	...	...	...	...	...	—
(iv) Number of visits made during the year	...	...	...	...	...	7

PREVALENCE OF, AND CONTROL OVER INFECTIOUS DISEASE.

The number of cases of infectious disease notified in each year since 1916 is shown, classified according to the particular disease, in Table 17, whilst the ward incidence of certain of the notifiable diseases during each of the last twelve years is shown in Table 18. The number of deaths from certain diseases occurring in each year since 1916 is shown in Table 19.

The incidence of notifiable infectious disease following the trend of recent years remains slight, and no major epidemic occurred. Diphtheria is held in check by immunisation and whooping cough only awaits the finding of a satisfactory prophylactic when an immunisation campaign will be launched.

In recent times the most disturbing feature has been the increase in gastro-enteritis, usually mild in character and occurring in small localised outbreaks. The need is for improved hygienic facilities and better technique among the canteen workers at canteens generally.

SMALLPOX.

No case of this disease occurred during the year although a considerable amount of follow-up work was carried out in respect of contacts arriving from abroad in infected ships.

SCARLET FEVER.

The incidence of this disease was low, only 44 cases being notified, and it seems that we are now in a period of regression following the peak reached in 1943/44. No death from this disease has occurred in Chadderton since 1935, but the tradition of hospitalisation for this disease dies hard and 66% of cases were, at the request of family doctors, admitted to hospital.

DIPHTHERIA.

After ten years of intensive propaganda the lesson still has not been learnt by everyone. Diphtheria occurred sporadically

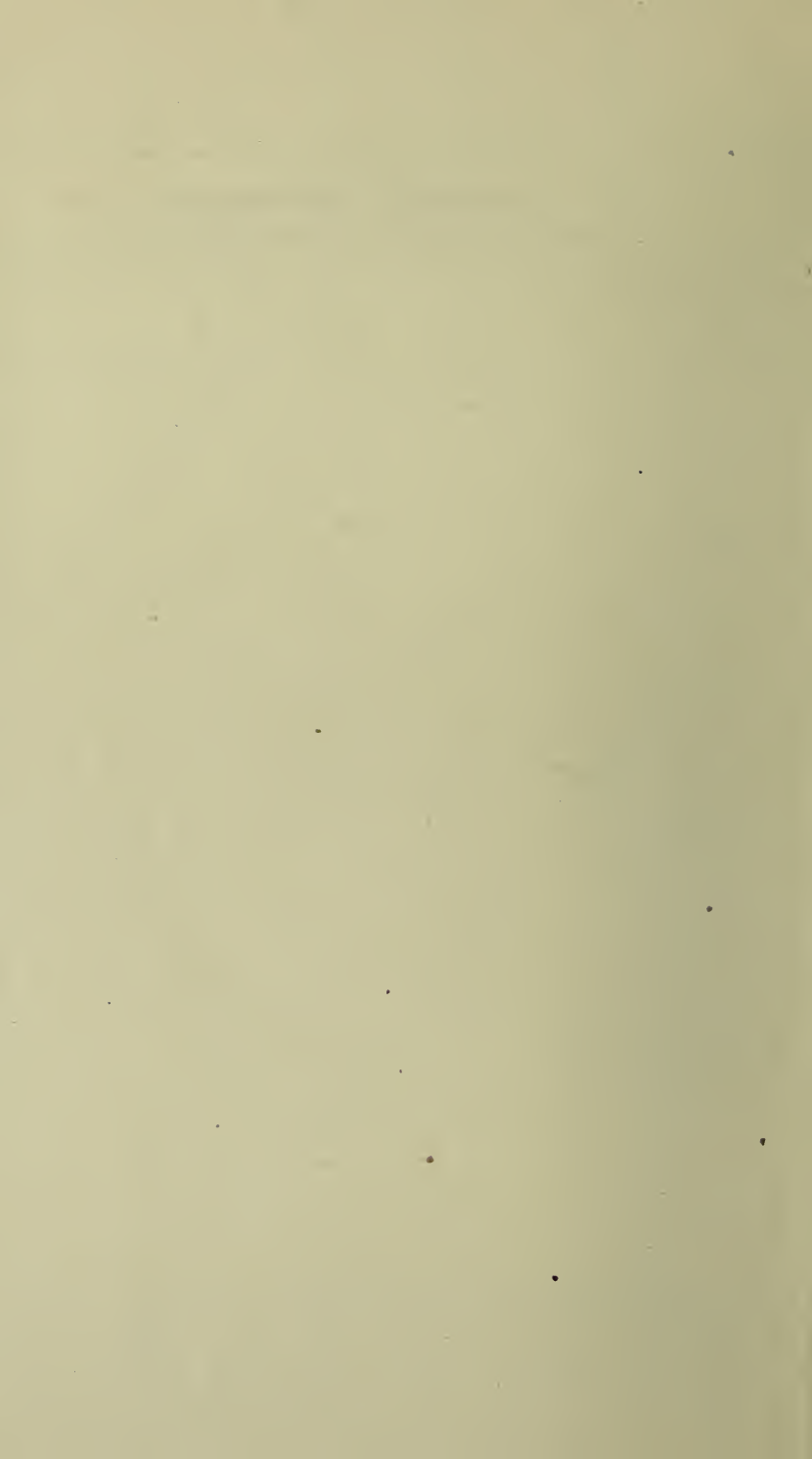
TABLE 15.

DIPHTHERIA IMMUNISATION.

Persons inoculated each year from 1936 to 1946.

Age at date of inoculation	1936	1937		1938		1939		1940		1941		1942		1943		1944		1945		1946	
		*1	2	1	2	1	2	1	2	1	2	1	2	1	2	1	2	1	2	1	2
Under 1	6	6	3	—	—	1	—	—	6	12	17	42	49	49	60	48	67	66	85	55	83
1	27	12	6	2	20	24	35	18	54	60	70	81	55	75	80	59	112	46	112	33	95
1½	11	5	3	—	7	3	11	—	13	24	9	26	20	23	12	10	7	10	13	4	29
2	21	3	2	1	8	8	6	1	10	19	16	17	24	9	7	9	8	5	9	2	11
2½	15	3	2	—	8	1	4	2	13	25	16	9	15	12	7	2	3	2	10	—	12
3	12	7	2	1	3	1	2	1	15	29	19	13	30	20	10	3	5	1	7	4	17
3½	17	2	1	—	—	4	5	—	5	20	14	7	20	10	5	2	1	6	4	—	10
4	20	5	6	1	7	3	2	—	9	22	15	18	27	14	9	1	1	—	1	2	5
4½	7	3	—	—	1	3	2	—	11	18	15	15	18	12	6	5	1	2	2	2	11
5	70	25	31	12	27	29	10	4	38	38	38	28	37	41	20	16	13	6	5	—	5
5½	82	12	3	1	10	16	10	—	31	22	19	10	19	14	6	13	3	—	4	—	9
6	79	10	2	2	4	12	9	—	25	25	10	20	21	18	3	14	9	2	1	3	8
6½	64	12	2	—	2	21	5	1	17	27	13	13	12	8	2	4	1	2	22	6	—
7	78	14	3	—	3	17	3	1	11	24	8	11	11	7	4	7	2	2	1	—	4
7½	86	8	1	1	4	2	3	—	4	16	9	4	7	2	—	2	—	—	1	—	6
8	78	7	—	—	4	5	1	—	5	30	5	7	14	3	1	—	1	—	—	—	6
8½	90	6	3	—	2	—	—	2	5	30	4	4	15	2	—	—	—	—	3	1	5
9	91	5	3	—	3	1	—	—	3	20	2	3	16	5	2	—	—	—	2	—	5
9½	82	3	2	—	4	—	—	—	3	18	3	3	15	2	2	1	—	—	—	1	4
10	75	1	—	—	3	—	1	—	3	19	1	2	25	4	2	—	—	—	—	—	5
10½	80	1	1	—	—	—	—	—	—	15	—	2	11	—	—	—	—	—	—	—	—
11	88	1	1	—	—	1	—	—	3	18	1	1	9	3	1	1	—	—	—	—	3
11½	80	1	2	—	—	1	—	—	5	21	1	6	13	—	—	—	—	—	1	—	2
12	75	1	2	—	—	1	—	—	1	13	—	7	5	2	3	—	—	—	1	1	10
12½	83	1	5	—	—	1	—	—	1	15	—	6	5	1	1	—	—	—	—	—	3
13	68	2	—	—	—	—	—	—	2	6	—	7	4	3	—	—	—	—	1	—	4
13½	73	5	—	—	—	—	1	—	3	12	1	1	4	1	1	—	—	—	2	1	4
14	10	—	—	—	—	—	—	—	1	3	—	—	2	—	—	—	—	—	—	—	1
14½	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
15+	—	—	—	—	—	—	1	—	—	—	—	—	3	—	1	—	—	—	—	—	—
Total each yr.	1568	247		141		266		327		907		869		585		431		417		474	

*1—Jan. to June. 2—July to Dec.



throughout the district during the first half of the year, seven cases occurring in widely separated areas and only two giving any history of association with each other. The third quarter was entirely free from notification but a further seven cases occurred in the fourth quarter, three of these being apparently unrelated to any other, whilst the remaining four together with a fifth occurring in the new year had close and tragic sequence. One unimmunised school girl developed diphtheria and was admitted to hospital. A second unimmunised girl attending the same school developed a sore throat a few days later for which she stayed at home without consulting a doctor. Twelve days later her younger brother developed a severe faucial diphtheria for which the family doctor was consulted on the fourth day. The child died in hospital a few hours later. Two other members of the family also developed the disease, one in a severe form and two more were infected for a period without showing obvious signs of illness. The first undiagnosed case in this family was found to be suffering from a slight paresis of the palate and the organism of diphtheria was recovered from a nasal swab.

This is the third occasion in four years in which a death from diphtheria has occurred in a family whose head has previously objected actively to immunisation and withheld consent. In each instance following the fatality written consent to immunisation of the remaining members of the family has been given. This seems a high price to pay for the privilege of parental decision.

Of the fourteen cases occurring during 1946 one had been immunised through the medium of the Local Authority's scheme three years earlier, five had at varying intervals of time probably been immunised elsewhere, and eight had never been immunised against diphtheria.

Immunisation continued to be practised vigorously, and systematic visitation was carried out over a part of the area during the year. 474 children were immunised whilst 807 children immunised in an earlier year were re-inoculated. It is estimated that at the end of 1946 57.8% of children under five years of age and 76.6% of those between the ages of five and fourteen years inclusive had been immunised through the medium of the Local Authority's scheme. In addition, an appreciable number of

children are immunised under private arrangements, and it is likely that 75% of the population under 15 years has been successfully inoculated.

Table 15 records the progress of the scheme since its inception in 1936.

TABLE 16.						
Diphtheria Attack Rate :—						
Year		Chadderton		England and Wales		Smaller Towns
1938	... ..	1.91	...	1.58	...	1.53
1939	... ..	0.62	...	1.14	...	1.16
1940	... ..	0.36	...	1.16	...	1.21
1941	... ..	0.30	...	1.25	...	1.19
1942	... ..	0.71	...	1.05	...	0.91
1943	... ..	0.65	...	0.88	...	0.77
1944	... ..	0.34	...	0.58	...	0.69
1945	... ..	0.64	...	0.46	...	0.56
1946	... ..	0.46	...	0.28	...	0.31
Diphtheria Death Rate :—						
1938	... ..	0.16	...	0.07	...	0.06
1939	... ..	0.06	...	0.05	...	0.04
1940	... ..	0.00	...	0.06	...	0.05
1941	... ..	0.00	...	0.07	...	0.06
1942	... ..	0.04	...	0.05	...	0.04
1943	... ..	0.03	...	0.03	...	0.04
1944	... ..	0.00	...	0.02	...	0.03
1945	... ..	0.03	...	0.02	...	0.02
1946	... ..	0.03	...	0.01	...	0.01

The presence of sporadic cases of diphtheria throughout all parts of the area during most of the year, and its persistent finding of weak spots in our defensive measures implies no loss of virulence on the part of the diphtheria organism. Chadderton is not an epidemiological entity, and cannot therefore by its own efforts eliminate diphtheria from its midst. It has for eight years now avoided any major outbreak, a condition of affairs which is undoubtedly due to the high level of immunity maintained in recent years by inoculation.

PNEUMONIA.

During 1946 25 cases of pneumonia were notified, 60% of the cases being males and less than a quarter of the cases occurring in the five months April to August. The preponderance of

fatality from pneumonia amongst males in the winter months is the result of climatic and occupational hazard and is a persistent feature of the statistics of this area. Three cases were admitted to hospital where two died from causes other than pneumonia. The remaining twenty-two cases were nursed at home among which three deaths occurred, two of these being ascribed to influenza. In addition a further eleven deaths were recorded from all forms of pneumonia, of which two occurring in hospital and two occurring at home could be classified as resulting from primary pneumonia. It might reasonably be assumed that in 1946 twenty-nine cases of primary or influenzal pneumonia had their origin in this area among which seven deaths occurred

DYSENTERY AND GASTRO-ENTERITIS.

One case of dysentery of the sonn  type was notified at the end of the year, when investigation revealed the presence of other cases of diarrhoea amongst children attending one school. Secondary familial cases had occurred also. The disease was mild in character and in many instances no doctor had been consulted. The primary cases appear all to have been infected at one time, and apart from the secondary familial cases no recurrence took place.

An outbreak of gastro-enteritis occurred at one nursery belonging to the Local Authority, eight children being involved over a period of four days. The infection appeared to have come from a child newly admitted to the nursery, three days prior to the onset of the first case. The usual measures to combat the outbreak were introduced on the first day and the outbreak subsided as rapidly as it arose, all the cases recovering.

MEASLES.

A total of 264 cases of measles occurred during 1946 without fatality.

It was a measles epidemic year for the area and the disease arrived in epidemic form from the neighbouring town of Oldham early in November. In the last eight weeks of the year over 220 cases occurred and the disease was still prevalent at the end of the year, continuing for another six weeks in 1947, before it finally subsided. The outbreak was sharp whilst it lasted but did not assume the proportions of some earlier outbreaks.

TABLE 18.

WARD INCIDENCE OF INFECTIOUS DISEASES NOTIFIED SINCE 1935.

Disease	Ward	1935	1936	1937	1938	1939	1940	1941	1942	1943	1944	1945	1946
Diphtheria	N	8	11	4	23	8	1	1	7	10	2	7	4
	C	7	10	4	14	4	4	2	1	5	2	9	7
	S	23	18	5	21	7	6	6	13	4	6	3	3
	T	38	39	13	58	19	11	9	21	19	10	19	14
Scarlet Fever	N	34	19	34	34	28	13	25	19	31	68	35	13
	C	39	18	19	12	19	5	14	19	27	48	37	11
	S	33	17	17	36	19	25	8	75	127	78	46	20
	T	106	54	70	82	66	43	47	113	185	194	118	44
Enteric Fever	N	0	0	0	0	0	2	1	0	0	0	0	0
	C	0	0	0	0	0	4	0	0	0	0	0	0
	S	0	0	0	0	0	2	2	0	0	0	0	0
	T	0	0	0	0	0	8	3	0	0	0	0	0
Pulmonary Tuberculosis	N	5	7	8	4	7	1	3	5	7	13	10	9
	C	8	6	9	5	10	7	11	9	7	5	13	12
	S	8	8	12	14	13	12	9	19	9	13	8	16
	T	21	21	29	23	30	20	23	33	23	31	31	37
Non-Pulmonary Tuberculosis	N	7	6	4	8	5	3	2	9	5	3	3	2
	C	3	6	5	2	2	3	4	5	6	3	2	3
	S	3	4	6	5	6	4	5	6	5	5	4	4
	T	13	16	15	15	13	10	11	20	16	11	9	9
Cerebro Spinal Fever	N	0	2	1	0	0	1	0	0	0	0	0	0
	C	0	1	0	0	0	0	1	2	0	0	0	0
	S	0	0	0	0	0	2	0	0	2	1	1	1
	T	0	3	1	0	0	3	1	2	2	1	1	1
Pneumonia	N	11	9	10	9	7	6	7	5	10	3	4	6
	C	20	13	12	9	4	9	12	11	12	11	4	8
	S	13	10	4	14	8	17	11	18	19	12	4	11
	T	44	32	26	32	19	32	30	34	41	26	12	25

WHOOPING COUGH.

Pertussis was unduly prevalent during the year, 127 cases being notified of whom 93 were five years of age or younger. The disease occurred with the greatest frequency in the winter months. Five cases were admitted to hospital, where one death occurred.

CEREBRO-SPINAL FEVER.

One case of cerebro-spinal fever occurred and was removed to hospital where death took place.

ERYSIPELAS.

Four cases occurred in 1946, all being nursed at home. No death occurred.

CHICKEN POX.

123 cases of chicken pox were known to have occurred in 1946. All cases were nursed at home, and no death took place.

ENTERIC FEVER, OPTHALMIA NEONATORUM,
ACUTE POLIOMYELITIS, PUERPERAL PYREXIA,
ACUTE POLIOENCEPHALITIS, ACUTE ENCEPHALITIS
LETHARGICA AND MALARIA.

No case of these diseases was notified during 1946.

GLANDULAR FEVER.

One young adult male was admitted to hospital for investigation and found to be suffering from infectious mononucleosis, from which he made a successful recovery.

TUBERCULOSIS.

37 cases of pulmonary tuberculosis were notified during the year, a figure in excess of the higher rates prevailing during the war years. Part, at least, of the increase, is likely to be due to earlier diagnosis arising from the presence of the mass radiography unit in the area during the spring. Non-pulmonary tuberculosis continues to be infrequent and 9 cases only were notified. It is certain that tuberculous cervical adenitis and abdominal tuberculosis are much less frequently met with to-

TABLE 19. NUMBER OF DEATHS FROM CERTAIN DISEASES.

YEAR	Small-pox	Puer-peral Fever	Measles	Scarlet Fever	Enteric Fever	Diarrhoea	Whooping Cough	Diphtheria	Tuberculosis	Cancer	Cerebro Spinal Fever	Pneumonia (All forms)	Influenza
1916	—	2	11	1	1	4	10	5	39	25	—	22	1
1917	—	—	17	1	1	5	2	4	45	31	—	20	5
1918	—	—	2	1	—	4	11	7	38	29	—	41	119
1919	—	2	2	—	—	6	—	—	22	36	—	36	36
1920	—	2	2	2	1	11	3	3	26	35	1	20	7
1921	—	—	—	3	1	8	1	4	33	39	—	16	14
1922	—	1	5	2	—	5	2	5	33	33	—	25	19
1923	—	1	3	1	—	2	5	3	21	36	—	43	13
1924	—	—	1	—	—	5	—	2	25	40	—	24	7
1925	—	1	2	1	—	6	4	4	24	28	—	28	12
1926	—	—	—	—	—	3	4	2	27	36	—	27	18
1927	—	2	—	—	1	3	1	3	28	33	—	30	18
1928	—	—	1	—	—	—	1	4	25	45	—	13	11
1929	—	—	2	—	—	3	14	—	23	41	—	33	39
1930	—	1	4	—	—	—	—	—	20	46	—	28	2
1931	—	—	—	1	1	1	2	—	19	40	—	17	10
1932	—	—	8	—	—	3	2	—	17	56	—	27	4
1933	—	1	—	2	—	1	3	1	21	37	—	13	20
1934	—	2	2	—	—	3	1	4	25	39	—	17	6
1935	—	1	—	1	—	3	1	4	10	52	—	31	6
1936	—	1	3	—	—	2	3	5	14	51	2	22	8
1937	—	1	1	—	—	4	2	2	13	45	1	14	14
1938	—	1	—	—	—	1	—	5	19	56	—	22	4
1939	—	1	—	—	—	4	1	2	17	52	—	14	4
1940	—	—	2	—	—	2	—	10	10	73	2	21	11
1941	—	—	1	—	—	2	—	—	11	56	2	17	4
1942	—	—	—	—	—	2	1	1	17	52	1	23	4
1943	—	—	—	—	—	2	—	1	20	54	—	16	6
1944	—	—	—	—	—	3	—	—	20	61	1	11	2
1945	—	—	—	—	—	—	1	1	15	34	1	16	2
1946	—	—	—	—	—	1	1	1	8	59	1	12	10

day, a fact which is significantly related to the increased use of pasteurised milk. Only two cases of cervical adenitis and two of abdominal tuberculosis were notified during the year. In addition two cases of bone disease, two of lupus and one of genital infection were notified.

A total of eight deaths from all forms of tuberculosis occurred during the year, the lowest number ever recorded in any one year, in Chadderton.

TABLE 20.									
Cases Notified and Deaths from Tuberculosis during 1946.									
Age	New Cases					Deaths			
	Pulmonary		Non-Pulmonary			Pulmonary		Non-Pulmonary	
	M.	F.	M.	F.		M.	F.	M.	F.
0-1 ...	—	—	—	—	...	—	—	—	—
1-5 ...	—	—	1	1	...	—	—	—	—
5-10 ...	1	—	—	—	...	—	—	—	—
10-15 ...	—	—	1	—	...	—	—	—	—
15-20 ...	1	1	3	—	...	—	—	1	—
20-25 ...	—	7	—	—	...	—	—	1	—
25-35 ...	7	7	—	1	...	1	1	—	—
35-45 ...	5	2	1	1	...	1	—	—	—
45-55 ...	3	1	—	—	...	—	—	1	—
55-65 ...	2	—	—	—	...	2	—	—	—
65 and over...	—	—	—	—	...	—	—	—	—
	19	18	6	3	...	4	1	3	—
	37		9		...	5		3	

PUBLIC HEALTH (PREVENTION OF TUBERCULOSIS) REGULATIONS, 1925.

PUBLIC HEALTH ACT, 1936, SECTION 172.

No action was found necessary under these enactments during 1946.

TABLE 21.

NOTIFIABLE DISEASES.

Number of cases of infectious diseases notified, number of deaths from these diseases, number of cases removed to hospital, and deaths in hospital during the year 1946.

Disease	Cases Notified													Hospital			
	Total Cases at all ages	Years										Total Deaths	Total Cases Re-moved to Hos-pital in district	Deaths in Hospital of persons <u>belonging</u> to district			
		Under 1	1-2	2-3	3-4	4-5	5-10	10-15	15-20	20-35	35-45				45-65	65 and over	
Smallpox	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Diphtheria	14	—	—	1	—	7	3	—	—	—	—	—	—	—	—	14	1
Erysipelas	4	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Scarlet Fever	44	—	—	2	—	26	4	—	1	1	—	—	—	—	—	29	—
Enteric Fever	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Puerperal Pyrexia	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Cerebro-Spinal Fever	1	—	—	—	—	—	—	—	1	—	—	—	—	—	—	1	1
Acute Poliomyelitis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Ophthalmia	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Neonatorum	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Malaria	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Dysentery	1	—	—	—	—	1	—	—	—	—	—	—	—	—	—	1	—
Encephalitis	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Lethargica	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Pneumonia	25	—	1	—	—	1	1	—	1	2	—	—	—	—	—	3	2
Measles	264	5	21	32	45	102	2	—	—	1	1	—	—	—	—	2	—
Whooping Cough	127	9	11	21	29	31	1	—	—	—	—	—	—	—	—	5	1
Pulmonary	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Tuberculosis	37	—	—	—	—	1	—	—	2	21	7	6	—	—	—	22	1
Non-Pulmonary	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Tuberculosis	9	—	—	1	—	—	—	—	3	1	2	—	—	—	—	3	2
Totals	526	14	33	57	78	86	169	12	8	30	15	17	7	23	80	8	8

SANITARY CIRCUMSTANCES OF THE AREA.

WATER SUPPLY.

The water supply to the area is ample in sufficiency and excellent in quality. It is derived mainly from the Oldham Corporation, but in part also from the Middleton and Heywood Water Board and the Manchester Corporation reservoirs. All the three supplies are chlorinated. Almost all, over 99%, of the dwelling houses in the area have a piped water supply direct to the house. No houses derive their water supply from stand pipes but 44 premises comprised of farms and dwelling houses are supplied from well and spring water.

There is no particular liability to plumbo-solvent action and no sampling of the water supply was undertaken by the local authority during the year.

DRAINAGE AND SEWERAGE.

NEW STREET WORKS. No new street works were completed during 1946.

745 linear yards of new sewer were laid during the year on the Long Lane housing estate.

CLOSET ACCOMMODATION.

Thirteen waste water closets were converted to fresh water closets during the year. 1,124 complaints of blocked closets were received, 1,067 of these affecting the waste water type of closet. This figure corresponds to 34.75% of the total number of waste water closets in the district. On the other hand 57 blockages of fresh water closets occurred, equivalent to 0.78% of the total in the area. In addition 321 blocked drains were cleared.

TABLE 22.

Type of Closet.	Number in 1944	Number in 1945	Converted. 1946	Number at end of 1946
Pail Closets	336	320	—	319
Waste Water Closets.	3,088	3,083	13	3,070
Fresh Water Closets...	7,103	7,108	—	7,284
Total	10,527	10,511	13	10,673

ERADICATION OF BED BUGS.

During 1946, 39 houses were disinfested, 36 being dealt with by the Hydrogen Cyanide method and 3 by spraying with D.D.T. solution. No council houses required to be treated.

RATS AND MICE DESTRUCTION.

During the year disinfestation of sewers was commenced and was in progress at the end of the year. The Private Dwellings Scheme of the Ministry of Food has been adopted by the Council.

The number of premises inspected was 282, the number of business premises found infested and treated was 10, and in addition the Council's sewage works and controlled tip were dealt with.

SANITARY INSPECTION.

The following table furnished by the Senior Sanitary Inspector, gives a summary of the work carried out by the inspectorate staff during 1946.

TABLE 23.
Summary of Work Done.

Number of investigations made in notifiable diseases...	376
Number of statutory notices served	143
Number of statutory notices complied with	42
Number of informal notices served	1981
Number of informal notices complied with	1119
Number of houses disinfested	89
Number of houses disinfested	39
Number of Pail Closets converted to Fresh Water Closets...	—
Number of Waste Water Closets converted to Fresh Water Closets	13
Number of visits to factories	30
Number of visits to slaughter-houses, Butchers' shops and places where food is prepared for sale	492
Number of visits to farms	56
Number of samples of milk examined (Biologically)	123
Number of Smoke observations	—
Number of houses inspected and recorded (Housing Consolidated Regulations)	—
Number of premises licensed for storage of petroleum	37
Number of premises licensed for storage of Carbide of Calcium	2
Number of complaints dealt with under Rats and Mice Destruction Act	242
Number of families displaced from Clearance Areas	—
Number of families transferred from Clearance Areas	—
Number of nuisances arising from blocked closets abated	1124
Number of nuisances arising from blocked drains abated	321

SWIMMING BATHS.

16,683 attendances were made by schoolchildren in conducted parties to the baths as part of their organised education.

SMOKE ABATEMENT.

Force of circumstances has brought the smoke nuisance to the notice of the most reluctant mind and the obvious link between abolition of atmospheric pollution and fuel saving has resulted in many hitherto uninterested people becoming smoke conscious. The practical interest shown by the industrialist today is dictated not only by the desire to husband fuel but also by the knowledge that there is now public recognition of the large part played by the domestic chimney in fouling the atmosphere and that steps, even though they are as yet only the tottering, hesitant steps of an infant, are being taken to deal with the domestic smoke problem.

The practice of taking regular formal smoke observations of industrial chimneys has for the time being been abandoned in favour of a policy of active discussions with factory engineers and stokers as to the best methods of solving industrial problems and the co-operation of the education authority has been obtained to the extent that a course of instruction in boiler-house practice will be held in two evening institutes in Chadderton during 1947.

In the domestic field as and when the new council houses are occupied assistance will require to be given to the householder in the organisation of the supply and distribution of smokeless fuels to those householders possessing the means of using them efficiently. An earlier scheme of fifteen years ago failed in Chadderton for want of such an organisation.

HOUSING.

The erection of 111 new council houses on the Long Lane housing estate has proceeded subject to the usual delays and difficulties experienced by all housing authorities, but a number of houses were in an advanced state of preparation by the end of the year.

74 new houses were completed under private enterprise during 1946.

Attention has been given to urgent defects arising during the war years in older houses. As a matter of general policy it was decided that old property must at least be weather proof, not dangerous to life or limb and be possessed of an adequate

TABLE 24.

No. of new houses erected during the year :—

(a) Total (including numbers given separately under (b)) ...	74
(i) By the Local Authority	Nil
(ii) By other Local Authorities	Nil
(iii) By other bodies and persons	74
(b) With State Assistance under the Housing Acts :—	
(i) By the Local Authority (included under (a) (i) above)	Nil
(ii) By other bodies or persons (included under (a) (iii) above)	Nil

1.—INSPECTION OF DWELLING HOUSES DURING THE YEAR :—

(1) (a) Total number of dwelling houses inspected for Housing defects (under Public Health or Housing Acts)	2027
(b) Number of inspections made for that purpose ...	6453
(2) (a) No. of dwelling houses (included under sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925 ...	Nil
(b) Number of inspections made for that purpose ...	Nil
(3) No. of dwelling houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	2
(4) No. of dwelling houses (exclusive of those referred to under the preceding sub-head found not to be in all respects reasonably fit for human habitation)...	2025

2.—REMEDY OF DEFECTS DURING THE YEAR WITHOUT SERVICE OF FORMAL NOTICES :—

No. of defective dwelling houses rendered fit in consequence of informal action by the Local Authority or their Officers	1073
---	------

TABLE 24—continued.

3.—ACTION UNDER STATUTORY POWERS DURING THE YEAR :—

A.—Proceedings under Sections 9, 10 and 16 of Housing Act, 1936 :—

- | | |
|---|-----|
| (1) No. of dwelling houses in respect of which notices were served requiring repairs | 16 |
| (2) No. of dwelling houses which were rendered fit after service of formal notices :— | |
| (a) By owners | 4 |
| (b) By Local Authority in default of owners | Nil |

B.—Proceedings under Public Health Acts :—

- | | |
|---|-----|
| (1) No. of dwelling houses in respect of defects to be remedied | 108 |
| (2) No. of dwelling houses in which defects were remedied after service of notices :— | |
| (a) By owners | 21 |
| (b) By Local Authority in default of owners | 17 |

C.—Proceedings under Sections 11 and 13 of the Housing Act, 1936 :—

- | | |
|---|-----|
| (1) No. of dwelling houses in respect of which Demolition Orders were made | 1 |
| (2) Number of dwelling houses demolished in pursuance of Demolition Orders | Nil |

D.—Proceedings under Section 12 of the Housing Act, 1936

- | | |
|--|-----|
| (1) Number of tenements or underground rooms in respect of which Closing Orders were made | Nil |
| (2) Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenements or rooms having been rendered fit | Nil |

HOUSING ACT, 1936, PART IV—OVERCROWDING :—

- | | |
|--|------|
| A.—(i) Number of dwelling houses overcrowded at the end of the year | 32 |
| (ii) Number of families dwelling therein | 37 |
| (iii) Number of persons dwelling therein | 217½ |

- | | |
|---|---|
| B.—No. of new cases of overcrowding reported during the year | 3 |
|---|---|

- | | |
|--|-----|
| C.—(i) Number of cases of overcrowding relieved during the year | Nil |
| (ii) Number of persons concerned in such cases | Nil |

water supply, means of heating and cooking, and effective methods of disposal of waste water, excreta and household refuse. This standard was set as one which, in the light of the difficult national situation, could be aimed at as a short term practical possibility. It would seem that for some years to come preservation of older types of housing is an important aspect of the general housing problem and one that will require to be kept in the forefront.

INSPECTION AND SUPERVISION OF FOOD.

MILK SUPPLY.

The number of dairy farms in the area at the end of the year was 28, these possessing some 495 cows. Two farms are licensed to produce and bottle accredited milk. 18 licences were issued in respect of the distribution of pasteurised milk.

TABLE 25.

Dairy Farms	28
Dairymen and shopkeepers registered as retail purveyors ...	166
Farmers and Dairymen from out-districts registered as retail purveyors in Chadderton	35
Shops licensed to sell pasteurised milk	16
Vendors licensed to sell pasteurised milk	2
Dairymen from out-districts licensed to sell Tuberculin Tested Milk (Certified)	Nil
Dairymen from out-districts licensed to sell Accredited Milk...	Nil

During the year 123 samples of milk were examined for the presence of tubercle bacilli and in 7 of these the organisms were found. The samples of milk sold under licence as pasteurised were free from tubercle bacilli. The results of examinations carried out during the past 15 years are shown in Table 26.

TABLE 26.

Results of Random Sampling, for the Presence of Tubercle Bacilli, of Milk Sold in the District.

Year	Positive	Negative	Total Samples	% Positive
1932	2	8	10	20
1933	1	17	18	5.5
1934	2	17	19	10.5
1935	0	11	11	—
1936	3	18	21	14.3
1937	8	50	58	13.7
1938	6	42	48	12.5
1939	0	24	24	—
1940	5	57	62	8.1
1941	4	26	30	13.3
1942	9	53	62	12.9
1943	10	82	92	10.9
1944	4	74	78	5.1
1945	7	89	96	7.3
1946	7	116	123	5.7

TABLE 27.

ANALYSIS OF MILK SAMPLES WHICH HAVE BEEN EXAMINED BIOLOGICALLY DURING THE YEAR 1946.

Source of Supply	No. of samples	Methylene Blue Test		Coliform Test		Number of samples satisfying both tests	T.B. Positive	T.B. Negative	% T.B. Positive	Number of Samples		% Unsatisfactory
		Satisfactory	Unsatisfactory	Satisfactory	Unsatisfactory					Satisfactory	Unsatisfactory	
Chadderton Farmers	48	40	8	43	5	38	3	45	6.25	35	13	27.08
Dairy Milk, Chadderton ...	6	6	Nil.	4	2	4	Nil.	6	Nil.	4	2	33.33
Out-District Farmers	40	34	6	31	9	27	1	39	2.50	26	14	35.00
Dairy Milk, Out-Districts ...	13	12	1	11	2	11	Nil.	13	Nil.	11	2	15.38
Pasteurised ...	5	5	Nil.	5	Nil.	5	Nil.	5	Nil.	5	Nil.	Nil.
Sterilised ...	6	6	Nil.	6	Nil.	6	1	5	16.66	5	1	16.66
Accredited Chadderton Farms	5	3	2	3	2	3	2	3	40.00	1	4	80.00
Total ...	123	106	17	103	20	94	7	116	5.69	87	36	29.27

Milk was also sampled in respect of its cleanliness in 123 instances and Table 27 sets out in detail the source of the milk sampled and the character and result of the tests carried out. 29 of the samples, equivalent to 23.57% of the total, failed to pass a standard of bacterial cleanliness and safety as represented by the tests indicated in the table.

The results in Table 26 suggest that there has been a progressive improvement in the milk supplied to the area as regards its tubercle bacilli content since the deplorable position, as revealed by sampling, that obtained four or five years ago, an improvement which is almost certainly consequent on the increased amount of heat-treated milk sold in the area.

MEAT AND OTHER FOODS.

During 1946, 492 visits were paid by the sanitary inspectors to slaughterhouses, meat shops, bakehouses, and places where food is prepared for sale, sold, or stored.

Table 28 shows the type and quantity of foodstuffs condemned as unfit for human consumption.

Licences were renewed in respect of 6 slaughterhouses, although slaughtering continues to be carried out at a central slaughterhouse outside the district.

TABLE 28.

	lbs.	ozs.
130 Tins Meat	290	4
Meat and Offal... ..	47	—
337 Tins Fish	231	11½
83 Packets Cereal	41	8
334 Tins Vegetables	599	12
Butter	37	—
Margarine	8	8
211 Tins Evaporated Milk	216	4½
Bacon	156	—
279 Jars Jam	281	—
Figs	104	—
1 Tin Syrup	2	—
Potatoes	112	—
Chocolate Biscuits	4	—
Seedless Raisins	25	—
19 Tins Fruit	45	8
76 Tins Soup	76	—
Pork	110	—
Dried Milk Powder	3 tons	—
		<u>4 tons, 1 cwt., 35 lbs., 8 ozs.</u>

CHEMICAL AND BACTERIOLOGICAL EXAMINATION OF FOODSTUFFS.

Sampling of foodstuffs is carried out by an inspector of the Lancashire County Council with the active assistance and co-operation of the sanitary staff of the Urban District Council. The results of analysis of the samples taken during 1946 have been supplied by the County Medical Officer of Health and are shown grouped in Table 29.

TABLE 29.						No. of samples taken	No. of samples genuine
Sample.							
Milk	...	...	...	...	...	32	29
Margarine	...	...	...	...	...	3	3
Condensed Milk	...	...	...	...	...	3	3
Sweets	...	...	...	...	...	3	3
Boracic Ointment	...	...	...	...	...	3	3
Total						44	41

One milk sample was found to be deficient of 4% solids-not-fat and further samples were obtained; one was deficient of 9% solids-not-fat and contained 6% extraneous water—legal proceedings were instituted and the vendor was fined £15 and £3 10s. 0d. costs; one milk was deficient of 1.7% solids-not-fat and contained 2.2% extraneous water—the vendor was cautioned and further samples obtained.

FACTORIES ACT, 1937.

Inspections of factories in relation to requirements, set out in the Factories Act, 1937, have been carried out intermittently during the year. The employment of women in small factories previously the exclusive preserve of men has created minor but acute problems in the provision of separate sanitary accommodation for the two sexes.

TABLE 30.

1. Inspections for purposes of Provisions as to Health including Inspections made by Sanitary Inspectors.

Premises	Number on Register	Number of		
		Inspection	Written Notices	Occupiers prosecuted
(i) Factories in which Sections 1, 2, 3, 4 and 6 enforceable by Local Authority ...	6	—	—	—
(ii) Factories not included in (i) to which Section 7 applies ...	152	30	2	—
(iii) Other premises under the Act (excluding out-workers' premises) ...	3	—	—	—
Total ...	161	30	2	—

2. Defects found.

Particulars	No. of Defects			Number of defects in respect of which prosecutions were instituted.
	Found	Remedied	Referred to H.M. Insp'tor	
Want of cleanliness (S.1) ...	—	—	—	—
Overcrowding (S.2) ...	—	—	—	—
Unreasonable temperature (S.3) ...	—	—	—	—
Inadequate Ventilation (S.4) ...	—	—	—	—
Ineffective drainage of floors (S.6) ...	—	—	—	—
Sanitary Conveniences (S.7)				
(a) Insufficient ...	—	—	—	—
(b) Unsuitable or defective ...	4	4	—	—
(c) Not separate for sexes ...	2	2	—	—
Other offences ...	2	2	—	—
Total ...	8	8	—	—

OUTWORKERS.

6 workpeople were notified as carrying out work in their homes in this area, principally in the clothing trade.

